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### **Project SEARCH – Fairbanks Memorial Hospital Entrance Criteria**

- Be between the ages of 18 and 22.
- Completed at least 4 years of high school; earned a Certificate of Achievement OR defer diploma for one year
- Agree that this will be the last year of student services with FNSBSD.
- Meet eligibility requirements for Vocational Rehabilitation.
- Meet eligibility requirements for Senior and Disability Services (this is preferred but not necessary).
- Have independent personal hygiene and grooming skills.
- Have independent daily living skills.
- Maintain appropriate conduct and social skills in the workplace.
- Take direction from supervisors.
- Be able to communicate effectively.
- Utilize public transportation when available and participate in travel training to insure success in using the bus independently.
- Have previous experience in a work environment (including school, volunteer, or paid work)
- **Desire and plan to work competitively in the community at the conclusion of the Project SEARCH program.**

Ability to pass drug screen, felony check, provide proof of required immunizations, and willing to obtain a flu shot. \*\*Required immunizations include: MMR x 2, Varicella x 2, and Hep B Series, OR Positive Titer Results (A titer is a blood test that checks for immunity and proves that the individual has been immunized at some point.). If selected, the student must submit proof of immunization by May 12<sup>th</sup> to remain eligible for the program.

### **INFORMATION FOR STUDENTS AND PARENTS/GUARDIANS:**

1. Students must meet and maintain Division of Vocational Rehabilitation Services eligibility criteria prior to entering Project SEARCH.
2. Students must meet and maintain SDS eligibility criteria prior to entering Project SEARCH (if applicable).
3. Students must submit a completed Project SEARCH application packet through the Fairbanks North Star Borough School District to Brenda Williamson, Special Education Coordinator, 520 5<sup>th</sup> Avenue, 4<sup>th</sup> Floor, Fairbanks, AK 99701.

### **APPLICATIONS ARE DUE BY MARCH 31, 2017**

Applications will be reviewed by a screening committee, which will make recommendations to FNSBSD concerning placement in the program.

Program selection interviews will happen the week of April 17-21, 2017.

### **STUDENTS AND PARENTS/GUARDIANS WILL BE NOTIFIED OF PLACEMENT BY APRIL 28, 2017.**

4. If students continue to meet all eligibility standards, then the students' teams will develop updated IEPs to reflect the goals and objectives for Project SEARCH.



Denali Center

Fairbanks Memorial Hospital



Project | SEARCH

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**\*PLEASE NOTE\***

ALL THE REQUIRED DOCUMENTS MUST BE COMPLETED AND SUBMITTED TOGETHER FOR CONSIDERATION

- ☐ Completed Application for Fairbanks Memorial Hospital/Project SEARCH Internship
- ☐ Photo ID
- ☐ Shot/Immunization Record and FNSBSD Health Records  
Immunization record must include: proof of MMR x2 and Varicella x2, and Hep B immunization through a shot record, OR positive titer results (A titer is a blood test that checks for immunity and proves that the individual has been immunized at some point). **\*\* If selected the student must submit this proof of immunization by May 1<sup>st</sup> to continue in the program.**
- ☐ Current Individual Education Plan (IEP) including Transition Goals
- ☐ Current ESER (Evaluation Summary and Eligibility Report)
- ☐ Project SEARCH Parent/Teacher/Student Preparation Assessment
- ☐ Two Letters of Recommendation
- ☐ Attendance Record
- ☐ Career Assessment (examples include: TPI, Worksite Observation Checklist, Student Interest Inventories, DVR Vocational Assessments, etc)

**Return completed Packet to:**

Brenda Williamson, Special Education Coordinator  
Fairbanks North Star Borough School District  
520<sup>th</sup> 5<sup>th</sup> Ave Suite E, Fairbanks, AK 99701  
907-452-2000 X11446  
[brenda.williamson@k12northstar.org](mailto:brenda.williamson@k12northstar.org)

A completed background check will be completed after the selection process is completed. If a student does not pass the background and drug check s/he will have to return to their previous educational program.

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**INTERNAL APPLICATION FOR Project SEARCH Internships**

**An Equal Opportunity Employer**

**FOR APPLICATIONS TO BE PROCESSED, ALL QUESTIONS  
MUST BE THOROUGHLY COMPLETED  
APPLICATIONS ARE ACCEPTED FOR OPEN INTERNSHIPS ONLY**

**Personal Data:**

**Student Name:** \_\_\_\_\_  
Last First Middle

**Address:** \_\_\_\_\_  
Street City Zip Code

**Home Phone Number:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Choose One: (optional)** ☐ Male ☐ Female

**Parent/Guardian:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **Work:** \_\_\_\_\_

**Educational Background (see attached assessment for detailed information):**

What high school did you attend? \_\_\_\_\_

Did you attend FNSBSD Bridge Program?

☐ Yes How many years? \_\_\_\_\_

☐ No

**Employment/Work Experience (see attached assessment for detailed information):**

Did you receive job coaching or other support in the previous jobs? ☐ Yes ☐ No

If yes, what type? \_\_\_\_\_

How many hours per day or week? \_\_\_\_\_

Did you receive any disability accommodations in previous jobs? ☐ Yes ☐ No

If yes what type? \_\_\_\_\_

Have you ever been fired from a job? ☐ Yes ☐ No

If so, why? \_\_\_\_\_

Have you ever quit a job before? ☐ Yes ☐ No

If so, why? \_\_\_\_\_



**PLEASE THOROUGHLY COMPLETE  
THE WORK HISTORY PORTION OF THIS APPLICATION**

Company Name	Dates	Job Title	Reason for Leaving
Address		Duties	
City State			
Supervisor's Name Phone			
Company Name	Dates	Job Title	Reason for Leaving
Address		Duties	
City State			
Supervisor's Name Phone			
Company Name	Dates	Job Title	Reason for Leaving
Address		Duties	
City State			
Supervisor's Name Phone			
Company Name	Dates	Job Title	Reason for Leaving
Address		Duties	
City State			
Supervisor's Name Phone			

**WORK REFERENCES WHO CAN VERIFY YOUR WORK PERFORMANCE (AT  
LEAST ONE MUST BE SUPERVISORY)**

Name	Address	Phone	Occupation
Name	Address	Phone	
Occupation			
Name	Address	Phone	
Occupation			

Are you able to perform the job that you are applying for, with or without reasonable accommodation?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

*I hereby certify that all the above questions are truthfully answered. I understand that any misleading or untruthful statements may render this application void and, if employed, could be just cause for termination of my employment.*

SIGNATURE of STUDENT \_\_\_\_\_ DATE \_\_\_\_\_  
 SIGNATURE of GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_  
 (if applicable)

**PERMISSION FOR REFERENCE CHECK**

To Whom It May Concern:

I have applied to Fairbanks Memorial Hospital for a Project SEARCH Internship. I hereby authorize you to release to Fairbanks Memorial Hospital any information as necessary to verify my qualifications for the Project SEARCH Internship for which I have applied.

SIGNATURE of STUDENT \_\_\_\_\_ DATE \_\_\_\_\_  
 SIGNATURE of GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_  
 (if applicable)



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**Project SEARCH – Fairbanks Memorial Hospital**  
**Student Self Preparation Assessment**

**Dear Project SEARCH Applicant:**

Fill out each section with the best information about yourself and your skills. That will help us learn more about you. If you need help, please ask your teacher or a parent. If someone else helps you, ask them to write down the answers in your own words.

<b>Name:</b>	<b>Birthday:</b>
<b>School District:</b>	<b>Email Address:</b>
<b>Home Phone:</b>	<b>Cell Phone:</b>
<b>Home Address:</b>	

**School Status**

- ☐ I completed 4 years of high school and graduated with a Certificate of Achievement
- ☐ I have completed at least one year in FNSBSD BRIDGE Program
- ☐ I have one or more years of school eligibility until my 22<sup>nd</sup> birthday

**Commitment to Community Employment**

- ☐ I want to get a job
- ☐ My family supports my goal of competitive community employment
- ☐ I have an original Social Security Card
- ☐ I have a State ID or a Drivers license as a picture ID
- ☐ I can pass a pre-employment drug screen
- ☐ I can pass a criminal background check
- ☐ I can be contacted through an answering machine or voice mail which has a business like greeting
- ☐ I have a businesslike email address that I check at least weekly
- ☐ I receive SSI and/or SSDI or other forms of public assistance
- ☐ I have had a benefits analysis and/or I understand the impact of earned income on the benefit

**Attendance**

- ☐ I have had no absences or tardies within the past school year
  - ☐ I have had 1 – 5 absences or tardies within the past school year
  - ☐ I have had 5 – 10 absences or tardies within the past school year
  - ☐ I have had 10 or more absences or tardies within the past school year
  - ☐ I have a medical condition that requires frequent hospital stays/excessive doctor/clinic visits (more than 20 days)
  - ☐ If yes to 10 or more days:  
Reasons why I have missed so much school: \_\_\_\_\_
-

### Appropriate Social and Behavior Skills

- ☐ I do not engage in flirting, inappropriate touching or public displays of affection such as holding hands, hugging, or kissing
- ☐ I do not swear or use profanity in a school or work setting
- ☐ I show respect to my peers and adults
- ☐ I work cooperatively with others
- ☐ I accept correction and criticism without a negative reaction
- ☐ I have lost my temper in a school or work environment
- ☐ I have displayed aggressive behavior in a school or work setting
  - ☐ Screaming or yelling
  - ☐ Hitting/Punching
  - ☐ Spitting
  - ☐ Kicking
  - ☐ Fighting

### Interpersonal Communication

- ☐ I respond when someone speaks or asks questions
- ☐ I make eye contact
- ☐ I use an appropriate tone of voice
- ☐ I engage in appropriate conversation in a school or work environment
- ☐ I use appropriate body language in the school or work environment
  - ☐ No inappropriate hand gestures
  - ☐ Sitting appropriately in a chair / posture
  - ☐ Respecting personal space
- ☐ I use a cell phone and electronic equipment (IPOD, Walkman, Bluetooth, etc). appropriately according to the school or business policy including refraining from talking and answering the phone, texting and listening to music

### Verbal Communication

- ☐ I am easily understood by others
- ☐ I sometimes have trouble getting my message across to others
- ☐ I use adaptive equipment to communicate
- ☐ I am willing to learn to use adaptive equipment to communicate if appropriate
- ☐ I use an interpreter and/or use sign language to communicate
- ☐ I talk about the same topics over and over again

### Physical Limitations:

- ☐ I have difficulty walking

I need to use the following to help me walk/navigate:

- ☐ Cane
- ☐ Walker
- ☐ Wheelchair
- ☐ Scooter
- ☐ Other

- ☐ I have limited use of my arms and/or hands

- ☐ I have other physical limitation that may affect employment: Please list:

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## Independent Daily Living and Self Care Skills

Check the box to tell us if you can do the skill independently or you need help

	Independent	Need
<u>Help</u>		
Cooking and nutrition	<input type="checkbox"/>	<input type="checkbox"/>
Budgeting	<input type="checkbox"/>	<input type="checkbox"/>
Handling Money/making change	<input type="checkbox"/>	<input type="checkbox"/>
Taking Medication	<input type="checkbox"/>	<input type="checkbox"/>
Toileting	<input type="checkbox"/>	<input type="checkbox"/>
Daily Shower/Bath	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate amount of sleep for school and work schedule	<input type="checkbox"/>	<input type="checkbox"/>

## Appearance and Professional Presentation

- ☐ I arrive at school and/or work daily with:
  - ☐ Clean and combed hair
  - ☐ Clean clothing and underwear
  - ☐ Brushed teeth/oral hygiene
  - ☐ Clean clothes
- ☐ I wear appropriate clothing for the weather
- ☐ I follow my school dress code
- ☐ I am willing to follow the designated dress code of my employer including rules on:
  - ☐ Appropriate clothing
  - ☐ Shoes
  - ☐ Facial hair
  - ☐ Facial and body piercings
  - ☐ Tattoos
  - ☐ Jewelry
  - ☐ Fingernail polish and length

## Transportation

- ☐ I have reliable transportation to get to work
- ☐ I have my own car, drivers license and insurance
- ☐ I know how to use public transportation
- ☐ I'm willing to learn to use public transportation
- ☐ I use a door-to-door or para-transit system independently and can make my own appointments
- ☐ I use a door-to-door or para-transit system and a family member/other person helps to make the appointments
- ☐ I have a family member/other who is willing to provide on-going transportation
- ☐ I am eligible for MRDD (or other disability related) transportation assistance
- ☐ Other transportation options \_\_\_\_\_



### Production Rate and Work Quality

- ☐ At work or at school, I get all my tasks finished on time and I turn things in by the due date
- ☐ At work or at school, it is difficult to get all my tasks finished or turned in by the due date
- ☐ At school or work I get most of the tasks correct
- ☐ At school, on chores or on my job my work is organized and neat

### Employability Skills

- ☐ I get to school, work or other appointments on time and independently
  - ☐ After lunch or a break, I get back to class or work on time
  - ☐ I know how to tell and keep track of time
  - ☐ I stay on a task until it is finished
  - ☐ If I am interrupted, I can return to the task and finish it
  - ☐ I can access the necessary information to fill out a paper application
  - ☐ I can have experience in filling out an on-line application
  - ☐ I know how to answer common interview questions
  - ☐ I can tell my boss or co-workers ways that I learn best or tools that help me be a good worker
  - ☐ Please list ways that help you learn best or tools you use to be successful at school or on the job:
- 
- 

### Prior Work Experience

- ☐ I have had a paying job(s) in my community. The places I worked were/are:
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- ☐ I have worked at my school doing: \_\_\_\_\_
  - ☐ I have volunteered at: \_\_\_\_\_
  - ☐ I do the following chores at home on a regular basis:
  - ☐ I have never worked or volunteered.
  - ☐ Please attach a resume if you have one
- 

### Academic Skills

- ☐ I am able to read work related vocabulary
- ☐ I am able to add and subtract
- ☐ I can use a calculator
- ☐ I like to write and keep a diary/journal
- ☐ I am able to read basic written directions

### Computer/Electronic Skills

- ☐ I have basic keyboarding skills and use correct typing techniques.
- ☐ I have basic keyboarding skills and use only two fingers (hunt and peck).
- ☐ I can use Microsoft Word to create letters and other documents
- ☐ I can use Microsoft Excel to create spreadsheets and other documents
- ☐ I can use Microsoft Publisher to create cards, newsletters, flyers and other documents
- ☐ I can use email correctly
- ☐ I can access the internet to get information, find services such as map quest and use various search engines
- ☐ I use a computer to play games, watch TV shows, listen to on-line streaming, etc.
- ☐ I have no computer skills
- ☐ I use a cell phone to talk to others
- ☐ I use a cell phone for texting

### School and Community Supports

I receive Related Services through my school district

- ☐ Speech Therapy
- ☐ Occupational Therapy
- ☐ Physical Therapy
- ☐ Other

- ☐ I am eligible for Division of Vocational Rehabilitation Services (DVR)

Name of counselor: \_\_\_\_\_

- ☐ I have a legal guardian Name of Guardian: \_\_\_\_\_

- ☐ I am eligible for DD services and have a Medicaid waiver

Name of Case Manager/Services Facilitator: \_\_\_\_\_

Please list other names and phone numbers below

Name	Title	Phone Number

**Problem Solving and Conflict Resolution:** Please give us some examples of how you would solve these problems. *If someone writes the answers for you, have them do it in your own words.*

I missed my bus ride when I was going someplace. To get where I was going I would do the following:

I was sweeping (vacuuming) and the sweeper quit working or got clogged. In order to finish my task I would do the following:

I lost my house key. In order to get in my house I would do the following:

I was using my computer and it stopped working. I would try to:

My parents were not home. It was dinner time and I was hungry. What would I do?

Someone teased me or was mean to me. I would react by:

Thanks for your work to finish this information and checklist! We appreciate it.





**Project SEARCH – Fairbanks Memorial Hospital**  
**Parent Assessment**

<b>Student Name:</b>	<b>School District:</b>
<b>Name of person filling out form:</b>	<b>Relationship to Student:</b>
<b>Your Phone:</b>	<b>Your Email:</b>
<b>Your Address:</b>	

**Please be honest when filling out this information to help us appropriately place the student.**  
**Check the boxes that pertain to student's current status.**

**School Status**

- ☐ The student completed 4 years of high school and graduated with a Certificate of Achievement
- ☐ The student has completed one year in FNSBSD BRIDGE Program
- ☐ The student has one or more years of school eligibility until s/he turns 22

**Commitment to Community Employment**

- ☐ Student wants to get a job
- ☐ The family supports the goal of competitive community employment
- ☐ The student has a Social Security Card
- ☐ The student has a State ID and/or Drivers license in addition to a school ID
- ☐ Student can pass a pre-employment drug screen
- ☐ Student can pass a criminal background check
- ☐ Student can be contacted through an answering machine or voice mail which has a business like greeting
- ☐ Student has a professional working email address. Please list: \_\_\_\_\_
- ☐ Student receives SSI and/or SSDI or other forms of public assistance
- ☐ Student has had a benefits analysis and/or understands the impact of earned income on the benefits

**Attendance**

- ☐ Student has had no absences or tardies within the past school year
- ☐ Student has had 1 – 5 absences or tardies within the past school year
- ☐ Student has had 5 – 10 absences or tardies within the past school year
- ☐ Student has had 10 or more absences or tardies within the past school year
- ☐ Student has had a medical condition that requires frequent hospital stays/excessive doctor/clinic visits (more than 20 days)
- ☐ If yes to 10 or more days:
  - o Why has the student missed so much school: \_\_\_\_\_

### **Independent Daily Living and Self Care Skills**

- ☐ Student is independent in daily living and self care skills
  - ☐ Cooking and nutrition
  - ☐ Budgeting
  - ☐ Handling Money/making change
  - ☐ Taking Medication
  - ☐ Toileting
  - ☐ Daily Shower/Bath
  - ☐ Appropriate amount of sleep for school and work schedule
- ☐ Student needs help with the following (from a parent/teacher/guardian/care taker)
  - ☐ Cooking and nutrition
  - ☐ Budgeting
  - ☐ Handling Money/making change
  - ☐ Taking Medication
  - ☐ Toileting
  - ☐ Daily Shower/Bath
  - ☐ Appropriate amount of sleep for school and work schedule

### **Appearance and Professional Presentation**

- ☐ Student arrives at school and/or work daily with:
  - ☐ Clean and combed hair
  - ☐ Clean clothing and underwear
  - ☐ Brushed teeth/oral hygiene
  - ☐ Clean clothes
- ☐ Student wears appropriate clothing for the weather
- ☐ Student follows the school dress code
- ☐ Student willingly follows the designated dress code of my employer including rules on:
  - ☐ Appropriate clothing
  - ☐ Shoes
  - ☐ Facial hair
  - ☐ Facial and body piercings
  - ☐ Tattoos
  - ☐ Jewelry
  - ☐ Fingernail polish and length

### **Transportation**

- ☐ Student has his/her own car, drivers license and insurance
- ☐ Student knows how to use public transportation
- ☐ Student is willing to learn to use public transportation
- ☐ Student uses a door-to-door or para-transit system independently
  - ☐ \_\_\_\_\_ Parent or other guardian makes appointment for student
  - ☐ \_\_\_\_\_ Student makes own appointments
- ☐ Student is eligible for MRDD (or other disability related) transportation assistance
- ☐ Student has a family member/other who is willing to provide on-going transportation
- ☐ Other transportation options \_\_\_\_\_

### **Appropriate Social and Behavior Skills**

- ☐ Student does not engage in flirting, inappropriate touching or public displays of affection such as holding hands, hugging, or kissing
- ☐ Student does not swear or use profanity in a school or work setting
- ☐ Student shows respect to peers and adults
- ☐ Student works cooperatively with others
- ☐ Student accepts correction and criticism without a negative reaction
- ☐ Student has appropriate behavior with adult supervision but may not be appropriate in all independent situations (or needs some adult prompts on an on-going basis)
- ☐ Student has lost temper in a school or work environment
- ☐ Student has acted aggressively in a school or work setting
  - ☐ Screaming or yelling
  - ☐ Hitting/Punching
  - ☐ Spitting
  - ☐ Kicking
  - ☐ Fighting

### **Interpersonal Communication**

- ☐ Student responds when someone speaks or asks questions
- ☐ Student makes eye contact
- ☐ Student uses an appropriate tone of voice
- ☐ Student engages in appropriate conversation in a school or work environment
- ☐ Student uses appropriate body language in the school or work environment
  - ☐ No inappropriate hand gestures
  - ☐ Sitting appropriately in a chair / posture
  - ☐ Respecting personal space
- ☐ Student uses a cell phone and electronic equipment (IPOD, Walkman, Bluetooth, etc). appropriately according to the school or business policy including refraining from talking and answering the phone, texting and listening to music

### **Verbal Communication**

- ☐ Student is easily understood by others
- ☐ Student sometimes has trouble getting message across to others
- ☐ Student uses adaptive equipment to communicate
- ☐ Student is willing to learn to use adaptive equipment to communicate if appropriate
- ☐ Student uses an interpreter and/or uses sign language to communicate
- ☐ Student talks about the same topics over and over again

### **Physical Limitations:**

- ☐ Student has difficulty walking

Student uses the following to walk/navigate:

- ☐ Cane
- ☐ Walker
- ☐ Wheelchair
- ☐ Scooter
- ☐ Other

- ☐ Student has limited use of arms and/or hands
- ☐ Student has other physical limitations that may affect employment. Please list:

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### Production Rate and Work Quality

- ☐ At work or school, student completes all tasks by due date
  - ☐ At work or school, student turns in assignments by deadline or due date
  - ☐ At work or school, it is difficult for the student to get all tasks finished or turned in on time
  - ☐ Please list strategies that have assisted the student to complete and turn in work on time
- 
- 

- ☐ At school or work the student gets most of the tasks correct
- ☐ If no, please explain: \_\_\_\_\_
- ☐ At school, with home chores or on the job the student's work is organized and neat
- ☐ Other comments: \_\_\_\_\_

### Employability Skills

- ☐ Student gets to school, work or other appointments on time and independently
- ☐ After lunch or a break, the student gets back to class or work on time
- ☐ The student knows how to tell and keep track of time
- ☐ The student is able to count money and make change accurately
- ☐ The student stays on a task until it is finished
- ☐ If interrupted, the student can return to the task and finish it
- ☐ The student can access personal information to complete a paper application
- ☐ The student has had experience with completing on-line applications
- ☐ The student knows how to answer common interview questions
- ☐ The student can tell his/her boss or co-workers what help is needed on their job
- ☐ Please list strategies that have been successful and leads to success and independence:
  - o \_\_\_\_\_
  - o \_\_\_\_\_
  - o \_\_\_\_\_

### Prior Work Experience

- ☐ The student has had a paying job(s) in the community. Places they have worked are:
  - o \_\_\_\_\_
  - o \_\_\_\_\_
  - o \_\_\_\_\_
- ☐ The student has worked at their school doing: \_\_\_\_\_
- ☐ The student has volunteered at: \_\_\_\_\_
- ☐ The student does the following chores at home on a regular basis:
  - ☐ \_\_\_\_\_
  - ☐ \_\_\_\_\_
- ☐ The student has never worked or volunteered \_\_\_\_\_

\* If the student has a resume, please attach

### Academic Skills

- ☐ The student is able to read vocabulary associated with work related tasks
- ☐ The student is able to apply basic addition and subtraction skills when needed
- ☐ The student uses a calculator when doing math problems or for everyday use
- ☐ The student likes to write or keeps a diary/journal
- ☐ The student is able to read basic written instructions

### Computer/Electronic Skills

- ☐ The student has basic keyboarding skills and uses correct typing techniques
- ☐ The student has basic keyboarding skills and uses only two fingers (hunt and peck)
- ☐ The student can use Microsoft Word to create letters and other documents
- ☐ The student can use Microsoft Excel to create spreadsheets and other documents
- ☐ The student can use Microsoft Publisher to create cards, newsletters, flyers or other documents
- ☐ The student can use email correctly
- ☐ The student can access the internet to get information, find services such as map quest and use various search engines
- ☐ The student has minimal computer skills
- ☐ The student uses a cell phone to talk to others
- ☐ The student uses a cell phone for texting

### Additional School and Community Supports

The student receives Related Services through the school district

- ☐ Speech Therapy
  - ☐ Occupational Therapy
  - ☐ Physical Therapy
  - ☐ Other
- 
- The student is eligible for DD services and has a Medicaid waiver  
Case Manager/Service Facilitator: \_\_\_\_\_
  - The student is eligible for Division of Vocational Rehabilitation Services (DVR)  
DVR Counselor: \_\_\_\_\_
  - The student has a legal guardian Name of Guardian: \_\_\_\_\_

Please list other names and phone numbers of other support people below. It can be anyone in the school or community that helps the student to be successful.

Name	Title	Phone Number

**Problem Solving and Conflict Resolution**

Please give us some examples of the student's problem solving abilities and/or how they handle conflict:

Home situation:

School situation:

Community or work situation: